

08/816615 Docket: 1876 (203-1834)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Scott E. Manzo

Peter W.J. Hinchliffe

Kevin Sniffin

Serial No: To Be Assigned

Examiner:

Unknown

Filed:

Concurrently Herewith

Group Art Unit:

Unknown

For:

GRAFT ATTACHMENT ASSEMBLY

APPLICATION TRANSMITTAL LETTER

Asst. Commissioner For Patents Washington, D.C. 20231

in due course.

The inventor(s) is/are

Sir:

Transmitted herewith for filing is the [x] utility $[\]$ design patent application in this case including:

1.		This application is a [] Continuation; [] Divisional [] Continuation in Part of prior application Serial No filed on [entire							
		genealogy should be set forth].							
2.	[]	This application claims priority from Provisional Application No, filed							
3.	[X]	The application consisting of <u>11</u> pages (including specification, claims and abstract).							
4.	[X]	3 sheet(s) of drawings is enclosed. The drawings are:							
	a. b.	[] formal; or [X] informal; formal drawings will be submitted in due course.							
5.	[X]	A signed declaration and power of attorney is enclosed.							
6.	[]	A declaration and power of attorney is <u>not</u> enclosed at this time since it <u>has not</u> been executed by the inventor(s). A signed declaration and power of attorney will be submitted							

- 7. [X] An Assignment of the invention to <u>United States Surgical</u>
 <u>Corporation</u> is enclosed. Please record the Assignment and return it to the undersigned. **TWO DUPLICATE COPIES OF THIS PAPER ARE ENCLOSED.**
- 8. [X] The Application filing fee is calculated below.

No.	Filed				No.	Extra*	Rate:	<u>Fee</u>
Basic Fee: Total Claims: Indep Claims:	25 4	- -	20	=	5 1		x 22.00 x 80.00	\$ 770.00 \$ 110.00 \$ 80.00
[] Multip Preser	ole Depe nted	enden	t Cla		+ \$260.00	,	\$ 0.00	
							TOTAL:	\$ 960.00

- 9. [X] Please charge Deposit Account No. 21-0550 in the amount of \$\frac{1,000.00}{21-0550}\$ which includes filing fee and recordation fee).

 TWO DUPLICATE COPIES OF THIS PAPER ARE ENCLOSED.
- 10. [x] The Commissioner is hereby authorized to charge any additional fees which may be required for this application, or credit any overpayment to Deposit Account No. 21-0550. TWO DUPLICATE COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

Date: 3/13/47

Neil D. Gershon Reg. No. 32,225

Attorney for Applicant

United States Surgical Corp. 150 Glover Avenue Norwalk, Connecticut 06856 (203) 845-1480





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CERTIFICATE OF EXPRESS MAILING

"Express Mail" Mailing Label No.: IB701309741 US

Date of Deposit: March 13, 1997

I hereby certify that the following:

- [x] This Certificate of Express Mailing
- [x] Application Transmittal letter
- [x] A patent application consisting of <u>11</u> pages of abstract, specification and claims
- [x] Declaration and Power of Attorney for patent application [x] executed [] unexecuted
- [x] 4 sheets of [] formal [x] informal drawings
- [x] Assignment [x] executed [] unexecuted
- [x] Assignment Recordation Sheet
- [x] Return postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR Section 1.10 on the Date of Deposit indicated above in an envelope addressed to the Asst. Commissioner for Patents, Washington, D.C. 20231.

Mausen M.

UNITED STATES SURGICAL CORPORATION 150 Glover Avenue Norwalk, CT 06856

(203) 845-4603